

	OPERATING PROCEDURE	
	<i>NEONATAL RESUSCITATION (NEWBORN TO ONE MONTH)</i>	
	Effective Date: May 1, 1997	Revised: October 1, 2000
	Approved By: 	
Approved By Operational Medical Director: 		

BLS

1. When a neonatal resuscitation is anticipated:
 - ☐ Call for additional resources (e.g. additional medic unit, EMS supervisor, etc.)
 - ☐ Pre-alert the receiving facility as soon as possible.
 - ☐ Transport the newborn as soon as possible.
2. Following delivery, position the child to facilitate passive airway clearing and suction mouth and nose as required.
3. Dry the patient and **maintain body temperature** while providing tactile stimulation.
4. Assess need for ventilatory assistance. If there is little or no respiratory activity, ventilate patient via neonate bag valve mask (BVM) at a rate of 40.
5. Assess heart rate:
 - A. If heart rate below 100, ventilate patient via BVM at a rate of 40. Reevaluate pulse after 15 to 30 seconds.
 - (1) If heart rate remains < 60, ventilate patient via BVM at a rate of 40 and initiate chest compressions as per current American Heart Association guidelines.
 - (2) If pulse is increasing, continue to ventilate until heart rate is 100 or greater.
 - (3) If pulse is not increasing and is below 80, initiate chest compressions as per American Heart Association guidelines.
 - B. If heart rate is >100, evaluate color.

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6. Evaluate color:
 - A. Peripheral (extremity) cyanosis is normal for a newborn; supplemental oxygen may be given until the patient pinks up.
 - B. Central cyanosis, with adequate respiratory and cardiac function, indicates the need for supplemental oxygen.
 - C. Oxygen should be delivered via supply tubing directed toward patient's nares, run at 6 liters per minute (LPM).
 - (1) 1/2 " away = approximately 80%
 - (2) 1" away = approximately 60%
 - (3) 2" away = approximately 40%
 - D. Oxygen can be slowly removed as long as the patient remains pink.
7. Perform and record 1 and 5 minute APGAR scores.
8. Take further precautions to prevent heat loss (e.g.: stocking caps, silver swaddler, etc.)

ALS ONLY

9. **If meconium aspiration is present, intubate, attach meconium aspirator device and suction. Repeat intubation and suctioning until airway is clear.**
10. **Obtain IV or IO access as needed.**
11. **Follow NALS/PALS/ACLS guidelines, as indicated, utilizing Broselow tape as necessary.**